

Example^a

Tennessee Sample - Notification of Compliance Status
National Emission Standards for Hazardous Air Pollutants:
Area Source Standards for Nine Metal Fabrication and Finishing Source Categories
40 CFR 63 subpart XXXXXX

Section 1. Facility Information

Date of Notification of Compliance Status: _____

Compliance date: Existing source: July 25, 2011 New source: _____
(Date of startup)

Source category and NAICS code(s): _____

Company name _____

Facility name (if different): _____

Facility (physical location) address: _____

Owner name/title: _____

Owner/company address: _____

Owner telephone number _____

Owner email address (if available): _____

Is the Operator the same person as the Owner? Yes No

If the Operator information is different from the Owner, please provide the following:

Operator name/title: _____

Operator telephone number: _____

Operator email address (if available): _____

^a This is an example of the type of information that must be submitted to fulfill the Notification of Compliance Status requirement of 40 CFR 63, subpart XXXXXX. You may submit the information in another form or format, or you may use this form.

Example^a

Section 2. Identification of Affected Operations

(1) The following are the operations at this facility subject^b to subpart XXXXXX (check all that apply):

Dry Abrasive Blasting		
	(1) Totally enclosed and unvented blast chambers	<input type="checkbox"/>
	(2) Vented enclosures with a filtration control device	<input type="checkbox"/>
	(3) Objects over 8 feet in any dimension without a filtration control device	<input type="checkbox"/>
Dry Machining		<input type="checkbox"/>
Dry Grinding or Dry Polishing with Stationary Machines		<input type="checkbox"/>
Spray Painting		
	(1) In a spray booth	<input type="checkbox"/>
	(2) Without a spray booth (for Fabricated Structural Metal facilities or any objects over 15 feet)	<input type="checkbox"/>
Welding		
	(1) Use less than 2,000 pounds of MFHAP-containing ^b welding rod or wire annually	<input type="checkbox"/>
	(2) Use 2,000 pounds or more of MFHAP-containing ^b welding rod or welding wire annually	<input type="checkbox"/>

^b **Important Note:** These operations are affected sources under subpart XXXXXX **only if/when** they use materials that contain or have the potential to emit metal fabrication or finishing metal HAP (MFHAP). **MFHAP containing/potential** is defined to be when the compounds of cadmium, chromium, lead, manganese, and nickel, or any of these metals in the elemental form with the exception of lead, are used or have the potential to be emitted in quantities of 0.1 percent or more, or 1.0 percent or more for elemental or compounds of manganese.

Example^a

(2) The following table lists each dry abrasive blasting operation at this facility subject to subpart XXXXXX, noted previously in item (1) in Section 2):

Abrasive Blasting Process Description / ID No.	HAP Emitted or Used ^b (Cd, Cr, Pb, Mn, Ni)	Compliance Method (Check all that apply)
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices
		<input type="checkbox"/> Totally enclosed, unvented <input type="checkbox"/> Vented, with control device; describe _____ <input type="checkbox"/> Objects over 8 ft (with no control) <input type="checkbox"/> Management practices

Example^a

(3) The following table lists each dry machining, dry grinding, or dry polishing operation subject to subpart XXXXXX, noted previously in item (1) in Section 2:

Dry Machining, Dry Grinding, or Dry Polishing Process Description / ID No.	HAP Emitted or Used ^b (Cd, Cr, Pb, Mn, Ni)	Compliance Method (Check all that apply)
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
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		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices
		<input type="checkbox"/> Control device; describe _____ <input type="checkbox"/> Management practices

Example^a

(4) The following table lists each spray painting operation subject to subpart XXXXXX, noted previously in item (1) in Section 2:

Spray Painting Process Description / ID No.	HAP Emitted or Used ^b (Cd, Cr, Pb, Mn, Ni)	Compliance Methods Employed (Check all that apply)
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices
		<input type="checkbox"/> Spray booth, PM filter, HVLP spray guns <input type="checkbox"/> HVLP spray guns, only <input type="checkbox"/> Management practices

Example^a

(5) The following table lists each welding operation subject to subpart XXXXXX, noted previously in item (1) in Section 2:

Welding Process Description / ID No.	HAP Emitted or Used ^b (Cd, Cr, Pb, Mn, Ni)	Compliance Methods Employed (Check all that apply)
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____
		<input type="checkbox"/> Management practices <input type="checkbox"/> Fume capture device; describe _____

Example^a

(6) The following applicable management practices are used at this facility, as practicable (check all that apply):

Dry Abrasive Blasting

- Minimize dust generation during emptying of abrasive blasting enclosure to reduce MFHAP emissions, as practicable.
- Operate all equipment associated with dry abrasive blasting operations according to the manufacturer's instructions.
- Minimize excess dust in the surrounding area to reduce MFHAP emissions, as practicable.
- Enclose dusty abrasive storage areas and holding bins, seal chutes and conveyors that transport abrasive materials.
- Minimize excess dust in the surrounding area to reduce MFHAP emissions, as practicable
- Do not re-use dry abrasive blasting media unless contaminants (i.e., any material other than the base metal, such as paint residue) have been removed by filtration or screening, and the abrasive material conforms to its original size.
- When practicable, switch from high particulate matter (PM)-emitting blast media (e.g., sand) to low PM-emitting blast media (e.g., crushed glass, specular hematite, steel shot, aluminum oxide).

Dry Machining, Dry Grinding, Dry Polishing

- Minimize excess dust in the surrounding area to reduce MFHAP emissions, as practicable
- Operate equipment according to manufacturer's instructions.

Spray Painting

- Proper cleaning and storage of spray guns, if applicable.
- Training for employees using HVLP spray equipment, with certification as having completed classroom or hands-on training in the proper selection, mixing, and application of coatings, with refresher training repeated at least once every 5 years.

Welding

- Operate equipment according to manufacturer's instructions.
- Use welding processes with reduced fume generation capabilities, if practicable. (e.g., gas metal arc welding (GMAW)—also called metal inert gas welding (MIG))
- Use welding process variations (e.g., pulsed current GMAW), which can reduce fume generation rates, if practicable.
- Use welding filler metals, shielding gases, carrier gases, or other process materials which are capable of reduced welding fume generation, if practicable.
- Optimize welding process variables (e.g., electrode diameter, voltage, amperage, welding angle, shield gas flow rate, travel speed) to reduce the amount of welding fume generated, if practicable.
- Use a welding fume capture and control system, operated according to the manufacturer's specifications, if practicable.

Section 3. Certification of Compliance Status

Yes, the facility referenced below **IS** operating in compliance with all of the relevant standards and other requirements of 40 CFR Part 63 subpart XXXXXX, National Emission Standards for Hazardous Air Pollutants: Area Source Standards for Nine Metal Fabrication and Finishing Source Categories

No, the facility referenced below is **NOT** operating in compliance with the relevant standards And/or other requirements of 40 CFR Part 63 subpart XXXXXX, National Emission Standards for Hazardous Air Pollutants: Area Source Standards for Nine Metal Fabrication and Finishing Source Categories

Reason for noncompliance:

I hereby certify that the information presented herein is correct to the best of my knowledge.

(Signature)

(Date)

(Name/title)

(____)_____
(Telephone No.)

Section 4. Submittal

Submit the Notification of Compliance Status to each of the following offices:

- a. Tennessee Department of Environment and Conservation
Air Pollution Control
William R. Snodgrass Tennessee Tower
312 Rosa L. Parks Avenue, 15th Floor
Nashville, TN 37243
- b. EPA Region IV
Director Air, Pesticides and Toxics Management Division
Atlanta Federal Center
61 Forsyth Street
Atlanta, GA 30303-3104